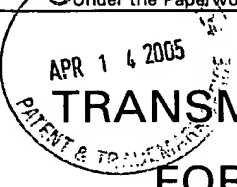
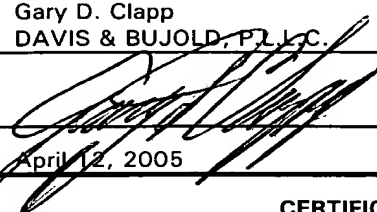
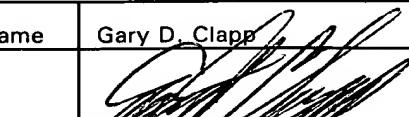
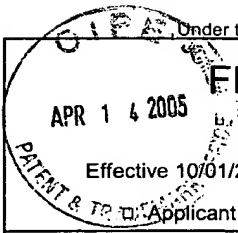


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

 <p><b>TRANSMITTAL FORM</b></p> <p><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	09/579,670
	Filing Date	May 26, 2000
	First Named Inventor	Miles Aram DEFOREST and Eric Trounson MACHARDY, Jr.
	Group Art Unit	2113
	Examiner Name	Michael C. Maskulinski Fax: (703) 872-93
Total No. of Pages in this Submission: 3	Attorney Docket Number	EMCCOR P11AUS
ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i> Postcard
REMARKS		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Gary D. Clapp DAVIS & BUJOLD, P.L.L.C. <div style="text-align: right;">Reg. No. 29,055 CUSTOMER NO. 020210</div>	
Signature		
Date	April 12, 2005	
CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 12, 2005.		
Type or printed name	Gary D. Clapp	
Signature	 <div style="text-align: right;">Date: April 12, 2005</div>	

<div style="float: left; width: 150px; text-align: center;">  </div> <div style="float: right; width: 350px;"> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2005</h3> <p style="margin: 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p> <p style="margin: 0;">Applicant claims small entity status. See 37 CFR 1.27</p> </div> <div style="clear: both;"></div>					<b>Complete if Known</b>																																																																																																																																																																												
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<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None  <input type="checkbox"/> Deposit Account: Deposit Account Number: 04-0213 Deposit Account Name: DAVIS & BUJOLD, P.L.L.C.					<b>3. ADDITIONAL FEES</b> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Fee Code</th> <th style="text-align: left;">Entity Fee (\$)</th> <th style="text-align: left;">Small Fee Code</th> <th style="text-align: left;">Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge-late filing fee/oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for re-examination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>120</td><td>2251</td><td>60</td><td>Ext.for reply w/in 1 mon</td><td></td></tr> <tr><td>1252</td><td>450</td><td>2252</td><td>225</td><td>Ext.for reply w/in 2 mon</td><td></td></tr> <tr><td>1253</td><td>1,020</td><td>2253</td><td>510</td><td>Ext.for reply w/in 3 mon</td><td></td></tr> <tr><td>1254</td><td>1,590</td><td>2254</td><td>795</td><td>Ext.for reply w/in 4 mon</td><td></td></tr> <tr><td>1255</td><td>2,160</td><td>2255</td><td>1,080</td><td>Ext.for reply w/in 5 mon</td><td></td></tr> <tr><td>1401</td><td>500</td><td>2401</td><td>250</td><td>Notice of Appeal</td><td>\$500</td></tr> <tr><td>1402</td><td>500</td><td>2402</td><td>250</td><td>Filing a Brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>1,000</td><td>2403</td><td>500</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>500</td><td>2452</td><td>250</td><td>Petition to revive - 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